

# Summary of Independent Reviewer Report

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## Independent Reviewer Role

#### Role and Responsibilities:

- Factual investigation and verification of data and documentation
- File written reports on Virginia's compliance with the terms of the Agreement
- Reports filed twice annually
  - First reporting period is March 6, 2012 October 6, 2012
  - Second reporting period is October 7, 2012 April 6, 2013
  - Every 6 months thereafter



## Report Focus Areas

#### Six Stated Focus Areas:

- Waivers
- 2. Case Management
- 3. Crisis Services
- 4. Integrated Day Activities and Employment
- 5. Discharge Planning & Transition from Training Centers (discussed in detail in next presentation)
- 6. Safety in the Community
- Other Areas Discussed in the Report
  - Individual and Family Support Program
  - Community Living Options
  - Family-to Family and Peer Programs
  - Integration and Current System Incentives



## Waivers

- Compliance with the requirements for establishing and distributing waiver slots during the first reporting period
- 2. Identify individuals with DD residing in nursing facilities or community ICFs to transition to integrated settings during FY13
- 3. Take the steps necessary to ensure that those with the most complex needs are provided opportunities to live in the most integrated setting appropriate to their needs and consistent with their informed choice



# Case Management

#### Positive Outcomes

 Individuals are receiving case management services, had current ISPs that listed all essential supports, were receiving medical supports identified in ISP, and were receiving recreation services identified in the ISP

#### Areas of concern:

 Some not receiving <u>all</u> services in ISP, some concerns identified were not resolved, some not receiving dental services, assistive technology, or day services



# Case Management (cont.)

- Monitor implementation of ISP to ensure timely additional referrals for medical professionals, day services, and communication
- Ensure all individuals were receiving supports identified in the ISP
- 3. Ensure staff are aware of and monitor major side effects of psychotropic medications
- Ensure all ISPs include objectives that are measurable and focused on skill development
- 5. Ensure that all providers and staff provide sufficient habilitation to teach individual skills/competencies



## Crisis Services

- Develop a plan and provide sufficient resources to provide crisis services for children with either ID or DD
- Develop a plan and provide sufficient resources to provide crisis services adults with DD that is not ID
- Ensure that adults with DD have case management to facilitate full access to crisis services and stabilization programs and access to community supports necessary to prevent future crises
- 4. Ensure that crisis services meet the statewide requirements of the Agreement regardless of the variation between CSB emergency services capacity to respond
- 5. Provide adequate funds for crisis service operations in FY14, including for mobile crisis teams in each region to respond to onsite crises within two hours by June 30, 2012



# Integrated Day Activities and Support Employment

- Complete the Employment First Implementation Plan with the information required in the Agreement and the elements needed for a plan to be efficiently implemented
- Ensure that PST and case managers provide reliable information to individuals and ARs regarding community options for integrated day services, including the opportunity to discuss and meaningfully consider these options with peers, and their families, who are already living and involved in integrated day services in the community
- 3. Ensure that PST and case managers considering recommending options in a congregate day center, consult with CIMs, and Regional Support Teams
- 4. Ensure that the pre-move monitoring process plans for and the post-move monitoring process evaluates and verifies the individual is offered meaningful opportunities to discover interests and participates in integrated day activities



# Additional Findings & Observations

#### Residential Services

 Financial incentives promote serving individuals with average or below average needs and to provide these services in larger group settings

#### Day Services

 "the way services have been developed and the way funding is structured have created obstacles to delivering individualized services in the most integrated setting."

#### Bifurcated ID/DD System

 Two agencies operating the ID and DD systems separately is confusing for families, difficult for providers, and inefficient



## **Summary Recommendations**

- 1. Review current ISP process to ensure that sufficient measurable objectives are developed to increase individual skills, self-sufficiency, and independence
- 2. Strengthen service provider staff training and monitoring systems to support the health and wellness of individuals with the most complex needs
- 3. Add to the existing monitoring process periodic requirements that staff demonstrate the competencies needed to fulfill their role in maintaining the health of the specific individuals they support
- 4. Add to the annual ISP process a review of the legal consent for psychotropic medications.
- 5. Add to the annual ISP review a discussion of strategies for creating more opportunities for exploring integration activities appropriate for each individual's interests and needs
- 6. Recognize and support the staff and the providers who have successfully provided services that promote meaningful integration and participation in community life
- 7. Review how other states' HCBS waivers are structured, and then amend and/or permanently modify the Commonwealth's waivers so the payment structure and rates encourage the service outcomes desired for individuals



# DBHDS Follow-Up Actions

- Reviewed each individual level record to address concerns identified by reviewers
- Currently reviewing each "area of concern", "step for compliance", and "recommendation":
  - Assign to appropriate Project Team
  - Gather additional information that may be needed
  - Develop action steps and incorporate into ongoing work plans with appropriate level of priority
    - Some areas require immediate response while others are system changes that will take many months



# Next Reporting Period

- October 7, 2012 April 6, 2013
  - Report published on/about June 1, 2013
- Priority Areas
  - Waiting list placements
  - Youth living in NFs or community ICFs
  - Employment First planning
  - Community Living Options/Housing plan
  - Regional Support Teams
  - Quality and Risk Management
  - Individual and Family Support
  - Crisis Services